PUBLIC	DISCLOSUR	RE COMMISSION
(P)C	9	711 CAPITOL WAY RM 208 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111

## I ORRVIST REGISTRATION

## DATECFILLEDIPOR

OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-801-2929		REGISTRATION	(12/14)	FEB 07 2018		
Lobbyist Name	<u> </u>		(12/14)	,		
Mark Rose						
Permanent Business Address			Business Tel	Business Telephone Numbers		
11225 SE 6th Street, Suite 110			Permanent /	Permanent (425) 445-5640		
11225 SE 6" Street, Suite 110						
			Temporary (	)		
City	State	Zip	Cell Phone (	206) 330-8000		
Bellevue	Washington	98004	or Pager			
Temporary Thurston County address during legislative session  N/A			E-Mail Addre	E-Mail Address		
IN/A				mrose@tpgrp.com		
Employer's name and address (person or group for which you lobby)  The Double of the Company of the Compan				ccupation, business or description of		
The Partners Group, LTD 11740 SW 68 <sup>th</sup> Parkway, Suite 200				purpose of organization Sale of Insurance Products and		
Portland, OR 97223				Employee Benefits Services		
Name and address of person having custody of accounts, receipts, books or other documents which substantiate				E-Mail Address		
lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.)				ichofor@tnarn.com		
Jake Shafer 11740 SW 68 <sup>th</sup> Parkway, Suite 200				jshafer@tpgrp.com		
Portland, OR 97223		•				
5. What is your pay (compensation) for lobbying?		Description of employment (che	eck one or more boxes)			
\$_50perhour_	☑ Full time employee	Full time employee				
(hour, day, month, year)				■ Lobbying is only a part     ■ Lobbying is only a part		
☐ Contractor, retainer or similar agree ☐ Unsalaried officer or member of gro			-	of other duties		
6. Are you reimbursed for lobbying expenses? Explain whi	ch expenses.	Does employer pay any of your		ectly?		
☐ Yes: \$ per		If yes, explain which ones.				
x Yes: I am reimbursed for expenses.  \[ \sum \text{No:}  \text{1 am not reimbursed for expenses.} \]				•		
7. How long do you expect to lobby for this organization?						
•	ng legislative session	Other, Explain				
8. Is your employer a business or trade association or organization which lobbies on behalf of its members or a representative entity which lobbies on behalf of businesses, groups, associations, or organizations? If "yes," attach a list showing the name and address of each member or funder who has paid fees, dues or other payments over \$1,450 during either of the past two years or is expected to pay over \$1,450 this year.						
		id, pays, or is expected to pay ov	ver \$1,450.	•		
☐ Yes. The list is of parties attached						
9. Does your employer have a connected, related or closely affiliated political action committee which will provide funds for you to make political contributions including purchase tickets to fund raising events? If so, list the name of that political action committee.						
No						
Yes. Name of the committee is:						
10. If lobbyist is a company, partnership or similar business entity which employs others to perform actual lobbying duties, list name of each person who will lobby. (See WAC 390-20-143 and 144 for instructions.)						
N/A						
<ol> <li>Areas of interest. Lobbying is most frequent before legis members or state agencies concerned with following subjects</li> </ol>		Remarks:		,		
	SUBJECT		•			
	Health Care Higher education					
03 Constitutions and elections 11	Human services	,				
05 Energy and utilities 13	Labor Law and justice					
	Local government State government					
07 Financial institutions and	Technology					
	Transportation Other - Specify:					
CERTIFICATION: I hereby certify that the above is a true	EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described					
statement.  12. LOBBYIST'S SIGNATURE	In this registration statement.					
12. LUBDINIS SIGNATURE	DATE	LINE LUTER S SIGNATURE,		21.111		
11/10/1/1/10 -	-116/19(		/ Jacob Shafer, Chi	ef Financial Officer 2/6/18		